

## CENTRAL INTELLIGENCE AGENCY

## INFORMATION REPORT

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THE SOURCE EVALUATIONS IN THIS REPORT ARE DEFINITIVE.  
THE APPRAISAL OF CONTENT IS TENTATIVE.  
(FOR KEY SEE REVERSE)

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1. Within the Ministry of the Armed Forces (Ministerul Fortelor Armate - MFA) in Bucharest, there was a Medical Department known as the Directia Sanitara Farmaceutica. The Chief Medical Officer and head of the Department was Colonel Dr. Manoliu. His office was the administrative center responsible for all military medical activities in peace and war.

25X1 [redacted] it was about two blocks east of the Cismigiu Garden. The Directia Sanitara Farmaceutica had several sections: Prophylactic, 25X1 Drug, Hospitals, and Statistical Sections. [redacted] the MFA had a separate 25X1 department for veterinary military medicine but [redacted] not certain of its 25X1 location.

2. The Directia, through its sections, furnished medical officers to the Armed Forces and was responsible for furnishing adequate medical care to the Armed Forces. The MFA had no responsibility for supplying medical personnel to the armed troops of the Ministry of the Interior (Ministerul Afacerilor Interne - MAI). The latter organization obtained its own physicians.

3. The MFA had control not only of the Army, but also of the Navy and the Air Force. There were three military regions in Rumania: the first had its headquarters, at Iasi [4710N-2737E], [redacted] the headquarters of the second region was at Cluj, on former Queen Marie Street, facing the square on which the opera house and the Orthodox cathedral are located; the headquarters of the third region was in Bucharest [redacted]

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4. There was, within the MFA, a subordinate branch for the administration of the Air Force. This was the Military Air Force Command (Comandamentul Fortelor Aeriene Militare - CFAM), which was also in Bucharest on Strada Daciei. The CFAM had a medical department known as the Serviciul Sanitar Farmaceutic (din CFAM). This department also had various administrative duties: prophylaxis, drugs, hospitals, and statistics, similar to the Directia Sanitara Farmaceutica; there were no separate sections for each of these duties, however. The Serviciul occupied seven rooms in the CFAM building on Strada Daciei. There was also a pharmacy which occupied four additional rooms.

5. In the headquarters office of the military regions, there was a medical officer responsible for carrying out the military medical administrative program as established in the Directia Sanitara Farmaceutica. [redacted]

25X1 [redacted] the Chief Medical Officer in the second  
25X1 region was Col. Constantinescu; Col. Pironcov was Chief Medical Officer in the third.

System for Supplying Medical Care to the Armed Forces

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6. [redacted]

7. The Rumanian Army plan for medical support of the Army during hostilities was as follows: When a soldier was wounded, he was to attempt to remove himself from the front line. The spot occupied by this wounded man, which was not fixed in advance, but which was very close to the point where he was injured, was called Punctul de Adunare al Ranitilor. The man was to be picked up at this point by stretcher bearers from his company who were to bring him to the company NCO, who had some knowledge of first aid. If necessary, the man was then to be conveyed further back to the Punctul Sanitar Batalionar. Here there were an NCO and several enlisted men who had first aid supplies. Each soldier had a bandage with him at all times to bandage his own wounds.

8. If necessary, the wounded man was then picked up by stretcher bearers from the regiment point, the Punctul Sanitar Regimentar, who were to take him back to the regiment's fixed position, at which point there was a physician in attendance. This was the first point at which a physician was available; in the mountain troops, however, a physician was available at the battalion point. The physician inspected the wound, and applied or adjusted tourniquets which had been applied in the initial treatment of the wounded man. Only the physician had morphine for administration to the wounded. A paper label was then attached to the wounded man to describe the treatment given him. The Punctul Sanitar Regimentar had a staff of one doctor, several NCO's and many stretcher bearers, usually a total of 40 men. The stretcher bearers who cared for the wounded were also used as combat troops.

9. Stretcher bearers from the next rear position, the Punctul Sanitar Divisionar, located about three kilometers behind the front, went up to the regiment point to pick up the wounded man and return him to the division position. Here there were two doctors, auxiliary personnel and several ambulances. The number of auxiliary personnel at this point was indefinite. The division position was a distribution point (Oficiul de Triere). The doctors here decided where to send the wounded man. He might be sent back to the front after treatment or cared for in a mobile hospital (Spital de Campania) in the theatre of operations. This hospital had several medical specialists in attendance. The Division doctors might decide to have the man placed (if such transport was available) on an ambulance train, ambulance plane (actually these were practically non-existent), or on an ambulance truck, and taken to a military or civilian hospital in the interior. In the Air Force, the PO-2 Soviet-type plane could be used to transport the wounded. This type of plane could carry two patients.

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10. Ambulance trucks available to the division medical point were either horse-drawn or motorized. The horse-drawn ambulances were used by mountain troops. As of early 1952, the Army had available to it old Hotchkiss ambulances. At that time, the Skoda plant in Czechoslovakia was making ambulances for delivery to Rumania, and there were rumors that the USSR would also supply ambulances.
11. Air Force medical support was primarily preventive care. As indicated above, there was no separate organization for Navy medical care. [redacted]  
 25X1 Dr. Spiridonescu [redacted] was assigned as physician to naval units. These units were  
 25X1 located at Constanta [4410N-2840E], Galati [4527N-2803E], Braila [4516N-2759E]  
 and Turnu Severin [4438N-2240E]. There were three military physicians for naval  
 25X1 troops at Constanta. The military hospital at Constanta also cared for naval  
 personnel.

12.

Defense Against CW and BW

13. The soldier was supplied with a mask which covered his eyes, nose and mouth, and which purified the air by passing it through activated charcoal. This was his only CW defense equipment. There was no protection for the Army against BW. Rumanians had absolutely no fear that the West would employ BW tactics against them. The Rumanian CW masks could be used against conventional gases only; they could not be used against nerve gases, which were unknown in Rumania. [redacted]  
 25X1 [redacted]  
 25X1 [redacted]  
 25X1 [redacted]

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